

DEPARTMENT OF EMPLOYEE RELATIONS
TRAINING AND EXPERIENCE QUESTIONNAIRE**ENVIRONMENTAL POLICY ANALYST****Any format modification made to this document will result in immediate rejection**

NAME _____

MAILING ADDRESS _____

DAY PHONE NUMBER (_____) _____

EVENING PHONE NUMBER (_____) _____

Best time to reach by phone: _____ (AM/PM)

WE URGE YOU TO MAKE COPIES OF ALL APPLICATION MATERIALS YOU SUBMIT

Thank you for your interest in this position. This questionnaire is an important part of the selection process and must be fully completed. It has been prepared to give applicants the same opportunity to explain their background as it relates to this position. The information you provide will be evaluated to determine your eligibility for further consideration. Please fill out this form completely and accurately. Incomplete or inaccurate information will not be considered. Please type or use BLACK INK (for reproduction purposes) and attach this questionnaire to your completed application (unless you have previously submitted an application). Please ATTACH ADDITIONAL PAGES USING SAME FORMAT WHEREVER NECESSARY. A RESUME WILL NOT BE ACCEPTED AS A SUBSTITUTE FOR THIS QUESTIONNAIRE. Please DO NOT say "SEE RESUME."

MAIL APPLICATION MATERIALS TO:

City of Milwaukee
Department of Employee Relations
200 E. Wells St., Room 706
Milwaukee, WI 53202-3554

PLEASE READ CAREFULLY BEFORE SIGNING: All information in this Questionnaire is subject to verification. The answers to the questions on the attached pages are true and complete to the best of my knowledge. I understand that falsification of this form may result in disqualification or removal from a City position.

YOU MUST SIGN AND DATE THIS FORM.

SIGNATURE: _____ DATE: _____

I. EDUCATION OR TRAINING

A. Bachelor's Degree: Yes _____ No _____

Major: _____ Minor: _____

College or University: _____ Date: _____

B. Master's Degree: Yes _____ No _____

Major: _____ Minor: _____

College or University: _____ Date: _____

Thesis or Special Emphasis: _____

C. Please list and describe any relevant college research projects which may relate to this position.

D. Please describe any other education, training or professional seminars you have successfully completed which may relate to this position. (Be sure to include name of institution and dates.)

II. PROFESSIONAL ACTIVITIES

A. Are you now or have you been a member of any professional/academic organizations which may relate to this position? If yes, indicate:

NAME OF ORGANIZATION	DATES OF MEMBERSHIP	OFFICES HELD

B. Describe any other special involvement in professional/academic activities, if applicable:

III. PROFESSIONAL EXPERIENCE

Please describe your professional experience, beginning with your current (or most recent) employer. If you held several positions with one employer, please explain each position separately and describe any increased responsibility.

A. 1. Present Employer _____ Hours per week _____

NOTE: May we contact this employer? Yes _____ No _____ Phone # _____

2. Employer's Address _____

3. Employer's Major Activity _____

4. Your Title _____

5. From (Mo./Yr.) _____ To (Mo./Yr.) _____ Total No. of Months _____

6. Title of your Immediate Supervisor: _____

7. Above Reports to (title): _____

8. List and ~~briefly describe~~ the major duties you performed in this job ~~and the approximate percentage of time spent performing each duty.~~

_____ %	_____

_____ %	_____

_____ %	_____

_____ %	_____

_____ %	_____

9. Describe your main accomplishments on this job (innovations, problem solutions, etc.):

10. Please describe in detail the extent of your experience in the following areas which you've had in this position (attach additional sheets if more space is needed):

a. Policy, operational, organizational and fiscal analysis: _____

b. Preparing and monitoring grants: _____

c. Making presentations: _____

B. 1. Previous Employer _____ Hours per week _____

NOTE: May we contact this employer? Yes _____ No _____ Phone # _____

2. Employer's Address _____

3. Employer's Major Activity _____

4. Your Title _____

5. From (Mo./Yr.) _____ To (Mo./Yr.) _____ Total No. of Months _____

6. Title of your Immediate Supervisor: _____

7. Above Reports to (title): _____

8. List and ~~briefly describe~~ the major duties you performed in this job ~~and the approximate percentage of time spent performing each duty.~~

_____ % _____

_____ % _____

_____ % _____

_____ % _____

_____ % _____

_____ % _____

_____ % _____

_____ % _____

9. Describe your main accomplishments on this job (innovations, problem solutions, etc.):

10. Please describe in detail the extent of your experience in the following areas which you've had in this position (attach additional sheets if more space is needed):

- a. Policy, operational, organizational and fiscal analysis: _____

- b. Preparing and monitoring grants: _____

- c. Making presentations: _____

- C. 1. Previous Employer _____ Hours per week _____

NOTE: May we contact this employer? Yes _____ No _____ Phone # _____

2. Employer's Address _____

3. Employer's Major Activity _____

4. Your Title _____

5. From (Mo./Yr.) _____ To (Mo./Yr.) _____ Total No. of Months _____

6. Title of your Immediate Supervisor: _____

7. Above Reports to (title): _____

8. List and ~~briefly describe~~ the major duties you performed in this job ~~and the approximate percentage of time spent performing each duty.~~

_____ %	_____

_____ %	_____

_____ %	_____

_____ %

_____ %

9. Describe your main accomplishments on this job (innovations, problem solutions, etc.):

10. Please describe in detail the extent of your experience in the following areas which you've had in this position (attach additional sheets if more space is needed):

- a. Policy, operational, organizational and fiscal analysis: _____

- b. Preparing and monitoring grants: _____

- c. Making presentations: _____

- IV. Briefly describe anything else about yourself or your background which would help qualify you for this position - if you have not provided the information elsewhere on this form.

[illegible]